Policy Number: HSCM0029
Manual Name: SMSO Policy Manual
Policy Name: Primary Care Physician
Empanelment Approved By: CMO
UMPC Approved: 12/21/2023
Last Revised: 12/5/23, 11/4/25

Uncontrolled if Printed

SMSO Policy Manual
PRIMARY CARE PHYSICIAN EMPANELMENT POLICY

Executive Sponsor: Chief Medical Officer

Issuing Department: Clinical Management

Gate Keeper: Director, HSM Clinical Management

COMPLIANCE STATEMENT:

Enforcement: All members of the workforce are responsible for compliance with this policy. Failure to abide by the requirements of this policy may result in corrective action, up to and including termination. Workforce members are responsible for reporting any observed violations of this policy.

Review Schedule: This policy will be reviewed and updated as necessary and no less than every two years.

Monitoring and Auditing: The Issuing/Collaborating Department(s) is responsible for monitoring compliance with this policy.

Documentation: Documentation related to this policy must be maintained for a minimum of 10 years.

APPLIES TO:

☒ SummaCare   ☒ APEX
☒ Summa Management Service Organization (SMSO)   ☒ Summa Insurance Company

LINE(S) OF BUSINESS:

☒ Commercial Groups   ☒ Medicare
☒ Medicare Supplemental   ☒ On-Exchange
☒ Off-Exchange   ☒ Self-Funded

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1.0 Purpose:

1.1   This policy defines the process for attributing, assigning, and storing information about Primary Physicians and clarifies how to determine the correct physician of record.

2.0   Policy:

2.1   The Plan will store information about members' Primary Care Physicians (PCPs). When a member has not selected a PCP, The Plan will attribute one based on claims experience as described below using the attribution methodology or assign a Primary Care Physician if applicable based on the information in this policy and procedure.

2.2   For Medicare Advantage (MA) members, coverage decisions follow Medicare rules and regulations pertaining to MA plans, as well as federal and state regulations, and the member's evidence of coverage (EOC) document. When appropriate, relevant current clinical guidelines, SummaCare's internal policies/procedures and drug formularies may be utilized in the absence of Medicare guidance.

2.3   For non-Medicare members, coverage decisions follow appropriate federal and state requirements and the member's evidence of coverage (EOC) document. Additionally, SummaCare's internal policies/procedures, and drug formularies are followed when appropriate

3.0   Procedure:

3.1   Medicare HMO/POS

3.1.1   Primary Care Physicians (PCPs) selected by members on their enrollment application are loaded into the claims system as the PCP of record. This includes PCPs transmitted to the Plan on electronic enrollment files.

3.1.2   If no valid PCP is selected, the system will default to PCP# GY99 – "Call to Select PCP."

3.1.3   If the member calls Customer Service or logs into Plan Central to select a PCP or change to a different PCP, that PCP will be assigned in the claims system, with an effective date equal to or greater than the date of the call/PCP selection made in Plan Central.

3.1.4   If a member indicates that they do not want to select a PCP or prefer to use an out of network provider as their PCP (as permissible for Medicare POS plans), the generic PCP# GY88 – "No PCP selected," will be entered on the member record.

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3.1.5 On a monthly basis, the Plan will run a monthly attribution report that attributes PCPs for members without an identified PCP.

3.1.6 On a semi-annual basis, The Plan completes a reconciliation whereby the PCP of record will be compared to the PCP/PCP's who rendered services and will be adjusted accordingly if applicable.

3.2 Commercial PPO (Excludes Marketplace)

3.2.1 New member enrollment applications will include a field to list the name of a Primary Physician.

3.2.2 Upon receipt, eligibility will load the PCP name in the claims system.

3.2.3 If unable to identify a Primary Physician, the "PCP" field in the claims system will be indicated by: 9034059 No Primary Physician Selected.

3.2.4 On a monthly basis, the Plan will run a monthly attribution report that assigns PCPs for members without an identified PCP.

3.2.5 On a semi-annual basis, the Plan completes a reconciliation whereby the PCP of record will be compared to the PCP/PCP's who rendered services and will be adjusted accordingly if applicable.

3.3 Marketplace (individual and small group on and off exchange)

3.3.1 New member enrollment applications will include a field to list the name of a Primary Physician.

3.3.2 Upon receipt, eligibility will load the Primary Care Physician name in the claims system.

3.3.3 If unable to identify a Primary Physician, the "PCP" field in the claims system will be indicated by: 9034059 No Primary Physician Selected.

3.3.4 Attribution is attempted first. On a monthly basis, the Plan will run a monthly attribution report that assigns PCPs for members without an identified PCP.

3.3.5 If attribution is not possible then a PCP is assigned. Assignment is based on the following:
3.3.5.1 Business Unit = SC, Region = MK

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3.3.5.2 Assignment Hierarchy – check previous member span for a participating provider, then check other family member spans for a participating provider. If a valid provider for assignment is not found, then assignment is done by geographic location.

3.3.5.3 These members are only attributed or assigned to New Health Collaborative providers (NHC providers are identified by Pay Class "SCT"

3.3.6 On a semi-annual basis, the Plan completes a reconciliation whereby the PCP of record will be compared to the PCP/PCP's who rendered services and will be adjusted accordingly if applicable.

3.4 Self-Funded

3.4.1 Self-funded and Business Process Outsourcing (BPO) clients will be given the option of utilizing the processes outlined above to assign Primary Care Physicians.

3.5 Reference Document: PCP Empanelment Methodology at end of policy

3.6 Director, HSM Clinical Management, has the authority and responsibility for the activities in this policy or procedure.

3.7 The Issuing Dept. is responsible for monitoring/enforcing the compliance with this policy.

3.7.1 Compliance will conduct periodic reviews to monitor and audit compliance with this policy.

PCP Empanelment Methodology

PCP Empanelment

A Primary Care Physician (PCP) serves as a first point of entry into the health care system, provides, coordinates, and helps patients find all needed health care services. Choosing a PCP creates a relationship that benefits patients with coordinated routine care (e.g., wellness and preventive care), and for comprehensive treatment of chronic problems. Services provided by a PCP include health promotion, disease prevention, patient education, and diagnosis, and treatment of acute and chronic illnesses.

To help promote primary care for our customers, we have adopted a PCP Empanelment process to encourage employees and dependents to select a PCP. This process offers three options for empaneling members to PCPs. Customers may choose one or more options to achieve the desired level of empanelment. The purpose of this document is to detail the methodology for each option.

Option 1: PCP Voluntary Selection
1. Employees and dependents select a contracted PCP and communicate the selected PCP through multiple channel options.

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a. To select a PCP, locate a provider by logging onto www.summacare.com.

- Click on "Find your provider" found on the right side of the screen.

- then find your "Doctor or Hospital"

- Pick your plan

- Search for covered providers by name, county or specialty; and determine if a specific provider is covered under the employer plan option [This section can be further detailed to address network tiers and changes to information displayed on medical identification cards].

b. Communicate selected PCP using one of the following mechanisms:

- Online

- Go to www.summacare.com and select the Members Tab and then Medical Benefits & Coverage MY MEDICAL BENEFITS/ Member Account (Plan Central)
  If already registered, members may login and select the Change
  My PCP tab and follow the instructions. If not registered, members can click on Member Registration and follow the directions. Members will need to complete an entry for themselves and each insured family member including adult children must do the same.

- Complete the PCP Information Form. Each insured member's identification number and PCP name and address for each selected PCP must be included. This information can be accessed on The Plan website (summacare.com) by selecting "Find a Doctor" icon and following the directions to identify your chosen PCP. Return the completed form to The Plan at the following address

  SummaCare
  Attention: Eligibility
  10 North Main Street
  Akron, Ohio 44308

  You may also fax this form to 330-996-8553.

- Call Customer Services at the telephone number referenced within the plan materials. A Customer Service representative will record your PCP selection(s).

Option 2: PCP Attribution Based on Claims Data

1. Attribution logic is applied to those members without a defined PCP and includes all active members for the specific group or line of business.
2. Claims report runs for the most recent 12-month period (no runout) for Medicare and 24 months for commercial accounts.
3. Attributed PCP must meet the following criteria:

   a. Highest allowed dollar amount in the appropriate time period. If a tie occurs in the dollar amount, select the PCP most recently seen.

   b. PCP must be currently active.

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    c. PCP must have a Hat Code = PC

    d. Member and PCP must have matched Business Unit, Program# and Region.

Option 3: PCP Assignment

1. If attribution is not possible then a PCP is assigned. A PCP may be assigned to members based on the following:

    a. Business Unit = SC, Region = MK

    b. The Assignment process will be used for those members where a Primary Care Physician was not selected or attributed.

    c. PCP's that are open to new patients – A list of Primary Care Physicians who are accepting new patients will be created

    d. Assignment Hierarchy – First the system will look for a participating provider on the previous member span, then the system will check other family member spans for a participating provider. If a valid provider for assignment is not found, then assignment is done by geographic location

    e. Geographic proximity to the home address of employee/family member using the following hierarchy logic

        o Quest Diagnostic software will be used to locate zip codes specific to the target geographic regions.

        o The system will match the member's residential zip code to PCP's zip code. It will cycle through PCP's so there is even distribution

        o If there is not a match on zip code, the hierarchy logic will apply to select the next closest PCP using the following logic:

            ▪ 5 miles

            ▪ 10 miles

RECONCILIATION (TRUE UP)

On a semi-annual basis, The Plan completes a reconciliation whereby the PCP of record will be compared to the PCP/PCP's who rendered services, and will be adjusted accordingly if applicable (True-up)

    a. Twice annually, The Plan will compare the PCP listed in the member's eligibility file with an attribution report.

    b. If the attributed PCP is different than the listed PCP, the PCP will be changed if:

- The attributed PCP is in the same group as the listed PCP and the plurality of charges is greater than the listed PCP. The PCP in the same group with the greater amount of charges will be listed.
  - o The attributed PCP is in a different group. The attributed PCP will be listed.

MEMBER CHANGES TO ATTRIBUTED OR ASSIGNED PCP's

Members always have the option to change their attributed or assigned PCP.

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4.0   References:

    4.1   Source of the policy (regulatory citation, accreditation standard, internal standard)

       4.1.1 Internal

    4.2   PCP Empanelment Methodology: See below

    4.3   Are there other policies that work in conjunction with this policy?

       4.3.1 Transition of Care

       4.3.2 Coverage of Out of Network Service Requests

    4.4   Replaces (if applicable):

       4.4.1 PPO Primary Physician Selection and Imputation

5.0   PCP Empanelment: See PCP Empanelment Methodology

7.0   Key Words or Aliases (Optional):
    7.1 Primary care physician empanelment policy

ORIGINAL *EFFECTIVE DATE*: 10/26/2010
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